FUJIFILM
Fujifilm Medical Systems, USA

510(k) Summary

Date: March 7, 2008

Contact Person:

Name:

Debbie Peacock

Title:

Regulatory Coordinator

Telephone: Facsimile:

(203) 602-3774

(203) 363-3813

Identification of Device:

Proprietary/Trade Name:

FUJIFILM FCR Go

Classification:

Class II

Classification Name:

Mobile X-Ray System

Product Code:

IZL

Common Name:

Mobile X-Ray System

I. INDICATIONS FOR USE

The FCR Go is indicated for use in generating radiographic images of the human anatomy. This device is not intended for mammographic applications.

II. DEVICE DESCRIPTION

The FCR Go battery powered, mobile x-ray system features a built-in Carbon XL CR reader and a notebook version of the CR Console (Flash IIP) or technologist console. Because the CR reader and CR console are incorporated in the equipment, the images are available to the technologist in a very short time, allowing the technologist to assure the exam has been performed adequately, minimizing return trips. Wireless communication is available, as an option, for updates to the patient worklist from the RIS/HIS. The FCR Go uses the same Image Plates (IPs) and cassettes used with other FCR systems.

The FCR Go provides smooth and quiet motorized travel capability via rear wheels independently driven by dual motors, a versatile radiography range through the telescopic arm, and easy-to-operate positioning of detector cassette providing sharp image quality with a short exam completion time.

Radiographic technique and exposure settings (kV, mAs) can be set up on the generator's control panel, as well as pre-configured from the CR console, based on exam type and typical recommended pre-programmed settings.



10. Indications for Use:

Proposed FCR Go IFU:

The FCR Go is indicated for use in generating radiographic images of the human anatomy. This device is not intended for mammographic applications.

Predicate Indications for Use:

- The Mobilett XP CR is a radiographic system designed for use in wards, intensive care and premature birth wards, pediatric and emergency departments, operating theatres as well as the central X-ray department.
- The GE Definium AMX 700 is indicated for use in generating radiographic images of the human anatomy. This device is not intended for mammographic applications.

11. Confidentiality:

We consider all information contained in this submission as well as its existence to be Confidential and request FDA to consider it as such. Fuji requests that FDA not make public disclosure of this information without prior consultation with Fuji as provided by 21 CFR 20.45.

If you have any additional questions, please phone me at (203) 602-3774, or fax (203) 363-3813, or e-mail @ debbie.peacock@fujimed.com.

Sincerely,

Debra A. Peacock

Regulatory Coordinator



Food and Drug Administration 9200 Corporate Boulevard Rockville MD 20850

APR 1 8 2008

Fujifilm Medical Systems, USA, Inc. % Mr. Jeff D. Rongero Senior Project Engineer, Medical Business Unit Underwriters Laboratories, Inc. 12 Laboratory Drive Research Triangle Park, NC 27709

Re: K080945

Trade/Device Name: FCR Go

Regulation Number: 21 CFR 892.1720 Regulation Name: Mobile x-ray system

Regulatory Class: II Product Code: IZL Dated: April 2, 2008 Received: April 3, 2008

Dear Mr. Rongero:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the <u>Code of Federal Regulations</u>, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the <u>Federal Register</u>.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

This letter will allow you to begin marketing your device as described in your Section 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please contact the Center for Devices and Radiological Health's (CDRH's) Office of Compliance at one of the following numbers, based on the regulation number at the top of this letter.

| 21 CFR 876.xxxx | (Gastroenterology/Renal/Urology) | 240-276-0115 |
|-----------------|----------------------------------|--------------|
| 21 CFR 884.xxxx | (Obstetrics/Gynecology) | 240-276-0115 |
| 21 CFR 892.xxxx | (Radiology) | 240-276-0120 |
| Other | | 240-276-0100 |

Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR Part 807.97). For questions regarding postmarket surveillance, please contact CDRH's Office of Surveillance and Biometric's (OSB's) Division of Postmarket Surveillance at 240-276-3474. For questions regarding the reporting of device adverse events (Medical Device Reporting (MDR)), please contact the Division of Surveillance Systems at 240-276-3464. You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (240) 276-3150 or at its Internet address http://www.fda.gov/cdrh/industry/support/index.html.

Sincerely yours,

Nancy C. Brogdon

Director, Division of Reproductive, Abdominal, and Radiological Devices

Office of Device Evaluation

Mancy CBrogdon

Center for Devices and Radiological Health

Enclosure

Indications for Use

| 510(k) Number (if known): | K080443 | | |
|--|---|---|---|
| Device Name: FCR Go | | | |
| Indications for Use: | ÷ | | |
| The FCR Go is indicate anatomy. This device is | ed for use in generating is is not intended for mamr | adiographic images nographic applicatio | of the human |
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| Prescription UseX_ (Part 21 CFR 801 Subp | part D) AND/OR | Over-The-Coun (21 CFR 801 St | |
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| (Division Sign-Off) Division of Reproductive, Abdominal ar | ond . | | |
| Radiological Devices 510(k) Number | 45 | | |